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## BIB DATA SHEET

CONFIRMATION NO. 9286

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
|---------------|-----------------------|-------|----------------|---------------------|
| 10/672,695    | 09/26/2003<br>RULE    | 623   | 3738           | 6006-107            |

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/414,209 09/26/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
12/18/2003

|  |  |                  |                 |              |                    |
|--|--|------------------|-----------------|--------------|--------------------|
| Foreign Priority claimed   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119(a-d) conditions met                                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |                  |                 |              |                    |
| Verified and<br>/CHRISTOPHER D<br>PRONE/<br>Examiner's Signature | <input type="checkbox"/> Met after<br>Allowance<br>/CDP/<br>Initials | TX               | 29              | 32           | 3                  |

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**TITLE**

Implantable graft and methods of making same

|                            |   |  |
|----------------------------|---|--|
| FILING FEE RECEIVED<br>537 | FEES: Authority has been given in Paper<br>No._____ to charge/credit DEPOSIT ACCOUNT<br>No._____ for following: | <input type="checkbox"/> All Fees                            |
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